08-29-05

## PART B - FEE(S) TRANSMITTAL

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| er (Depositor's name) | Roberta A. Coope |
|-----------------------|------------------|
| (Signature)           | Koberta a. Co    |
| (Date)                | August 26, 2005  |
|                       |                  |

| APPLICATION NO.   | FILING DATE   |  | FIRST NAME   | O INVENTOR .  | ATTORNEY DOCKET NO.  | CONFIRMATION NO.   |  |
|---|---|--|--|---|--|--|--|
| 10/773,567  | 02/06/2004  | Kristine E. Lichtscheidl                       |  | Lichtscheidl  | 048675-0111  | 3560   |  |
| TITLE OF INVENTION: UTI   | ILITY CONNECTION STA  | ΓΙΟΝ   |  |   |  |  |  |
|   |   |  |  |   |  |  |  |
|   |   |  |  |   |  |  |  |
| APPLN. TYPE   | SMALL ENTITY  | ISSUE FEE                                      |  | PUBLICATION FEE   | TOTAL FEE(S) DUE   | DATE DUE   |  |
| nonprovisional  | NO  | \$0  |  | \$0   | \$0  | 10/07/2005   |  |
| EXAMIN  | VER   | ART UN   | IT   | CLASS-SUBCLASS  | ]  |  |  |
| PAUMEN, O   | GARY F  | 2833   |  | 439-501000  | •  |  |  |
| ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  |   |  | (1) the na<br>or agents<br>(2) the na  | nting on the patent front page, li<br>mes of up to 3 registered pater<br>OR, alternatively,<br>me of a single firm (having as a | nt attorneys 1 Foley a member a 2                                | & Lardner LLP  |  |
| "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. |   |  | 2 registere  | attorney or agent) and the named patent attorneys or agents. If name will be printed.   | nes of up to no name is 3  |  |  |
| 3. ASSIGNEE NAME AND R  | RESIDENCE DATA TO BE  | PRINTED ON T                                   | HE PATEN   | Γ (print or type)   |  |  |  |
| PLEASE NOTE: Unless a recordation as set forth in 3   | n assignee is identified below<br>7 CFR 3.11. Completion of                                       | w, no assignee<br>this form is NO              | data will apr<br>T a substitute  | ear on the patent. If an assign for filing an assignment.   | nee is identified below, the                                     | document has been filed fo                               |  |
| (A) NAME OF ASSIGNED  | E   | (E   | ) RESIDEN  | CE: (CITY and STATE OR CO   | UNTRY)   |  |  |
| Fiskars Brands, Inc.  |   |  | Mad  | dison, WI   | ,  |  |  |
|   |   |  |  |   |  | _  |  |
|   |   |  |  | patent): 🗖 Individual 🚨 C   | orporation or other private g                                    | roup entity Governmen                                    |  |
| 4a. The following fee(s) are er   | nclosed:  | 41   | Payment of   | ` '   |  |  |  |
| Issue Fee   |   |  | A check in the amount of the fee(s) is enclosed.   |   |  |  |  |
|   | all entity discount permitted)  | ).   | Payment by credit card. Form PTO-2038 is attached.   |   |  |  |  |
| Advance Order - # of C  | Copies  | <del></del>                                    | The Dir<br>Deposit Acc   | ector is hereby authorized by count Number 06-1447  | charge the required fee(s), or<br>(enclose an extra              | credit any overpayment, to copy of this form).           |  |
| 5. Change in Entity Status (f   | rom status indicated above)   |  |  | ——————————————————————————————————————  |  |  |  |
| a. Applicant claims SM  | ALL ENTITY status. See 37   | CFR 1.27.                                      | 🗖 b. Appli   | cant is no longer claiming SMA  | LL ENTITY status. See 37 (                                       | CFR 1.27(g)(2).  |  |
| The Director of the USPTO is<br>NOTE: The Issue Fee and Pub<br>interest as shown by the record  | requested to apply the Issue<br>blication Fee (if required) will<br>ds of the United States Paten | Fee and Publical not be accepted and Trademark | tion Fee (if and if and | ny) or to re-apply any previous<br>e other than the applicant; a reg  | ly paid issue fee to the applic<br>istered attorney or agent; or | ation identified above.<br>the assignee or other party i |  |

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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John M. Łazarus

**Authorized Signature** 

Typed or printed name

August 26, 2005

<u>48,367</u>

Date

Registration No. \_

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Lichtscheidl et al.

Title:

**UTILITY CONNECTION** 

STATION

Application No.:

10/773,567

Filing Date:

02/06/2004

Examiner:

Paumen, Gary F.

Art Unit:

2833

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

## CERTIFICATE OF EXPRESS MAILING I hereby certify that this correspondence is being deposited with the United States Postal Service's "Express Mail Post Office To Addressee" service under 37 C.F.R. § 1.10 on the date indicated below and is addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450. EV 593168438 US 08/26/05 (Express Mail Label Number) (Date of Deposit) Roberta A. Cooper (Printed Name)

## **TRANSMITTAL**

Enclosed herewith please find the following documents for the above-identified patent application.

- Issue Fee Transmittal (2 pages). [X]
- [X]Issue Fee Transmittal Form PTOL-85(B) (1 page).

The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.18, or credit any overpayment, to Deposit Account No. 06-1447. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 06-1447.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

Date AUGUST 26, 2005

FOLEY & LARDNER LLP

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(414) 297-5591

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